

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/585,919

FILING DATE

7-13-06

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT			AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1				51						
2	1		1				52						
3	1		1				53						
4	1		1				54						
5	1		1				55						
6	1		1				56						
7	1		1				57						
8	1		1				58						
9	1		1				59						
10	1		1				60						
11	1		1				61						
12	1		1				62						
13	1		1				63						
14	1		1				64						
15	1		1				65						
16	1		1				66						
17	1		1				67						
18	1		1				68						
19	1		1				69						
20	1		1				70						
21	1		1				71						
22	1		1				72						
23							73						
24							74						
25							75						
26							76						
27							77						
28							78						
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36							86						
37							87						
38							88						
39							89						
40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	2		2		2								
TOTAL DEP.	20	←	20	←	20	←							
TOTAL CLAIMS	22		22										